



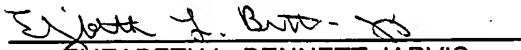
**IN THE  
UNITED STATES  
PATENT AND TRADEMARK  
OFFICE**

<i>Application Number</i>	10/806,038
<i>Filing Date</i>	March 22, 2004
<i>First Named Inventor</i>	SALLY MACKENZIE
<i>Group Art Unit</i>	1638
<i>Examiner Name</i>	A. Kubelik
<i>Attorney Docket Number</i>	1231-218

*Title of the Invention:* **IMPLEMENTATION OF A MITOCHONDRIAL MUTATOR**

**CERTIFICATE OF EXPRESS MAILING**

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ELIZABETH L. BENNETT-JARVIS  
Reg. No. 53,982

**AMENDMENT**

Mail Stop Amendment  
Commissioner for Patents  
P. O. Box 1450  
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Sir:

In response to the Final Office Action mailed September 26, 2006, please enter the amendments as shown on the attached pages.

**Amendments to the claims** begin on page 2.

**Remarks** begin on page 3.



11-22-06

AP/IEW

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/806,038	
	Filing Date	March 22, 2004	
	First Named Inventor	SALLY MACKENZIE	
	Art Unit	1638	
	Examiner Name	A. Kubelik	
Total Number of Pages in This Submission	8	Attorney Docket Number	1231-218

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Documents  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1) Certificate of Express Mail Label No. EV690530031US 2) Declaration under 37 CFR 1.132, 3 pgs
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	JONDLE & ASSOCIATES P.C.		
Signature			
Printed Name	ELIZABETH BENNETT-JARVIS		
Date	NOVEMBER 21, 2006	Reg. No.	53,982

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